TWELD - LEGIO) TEMPORIES TWO Complete and end this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents 8 P.O. Box 1450 SEP 0 2 2005 Alexandria, Virginia 22313-1450 (703) 746-4000 or <u>Fax</u> INSTRUCTIONS his form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where the printer correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated a corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 06/01/2005 Giaccherini Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Man Stop ISSUE FEE address above, or being facsimile transmitted to the USP 10 (701) 747-4000, on the date indicated below. Post Office Box 1146 Carmel Valley, CA 93924 (Depositor's name Thomas (Signature 31 005 gust (Date APTORNEY DOCKET NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR CONFIRMATION NO. 09/579.324 05/25/2000 Thomas Nello Giaccherini HDM2000-1 7267 TITLE OF INVENTION: METHOD FOR UTILIZING EXCESS COMMUNICATIONS CAPACITY APPLN. TYPE SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 09/01/2005 \$700 EXAMINER ART UNIT CLASS-SUBCLASS LY, ANH VU H 2667 370-315000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Thomas N. Giaccherini Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Mark P. Stone (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) SkyVault Secure Digital Distribution, Inc. Carmel Valley, CA Individual Corporation or other private group entity Please check the appropriate assignee category or categories (will not be printed on the patent): Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): 🖷 Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). Advance Order - # of Copies _ 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Ciaccherini

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